

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 5
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee JAMESTOWN ASSOCIATES		Date MM / DD / YYYY 10 / 08 / 2012	
Mailing Address 5 MAPLETON RD STE 300		Amount 12525.00	
City PRINCETON	State NJ	Zip Code 08540	Transaction ID : SE24-0.031748
Purpose of Expenditure MEDIA	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: AZ District: 02
Name of Federal Candidate Supported or Opposed by Expenditure: MARTHA MCSALLY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 156203.15		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee JAMESTOWN ASSOCIATES		Date MM / DD / YYYY 10 / 08 / 2012	
Mailing Address 5 MAPLETON RD STE 300		Amount 12525.00	
City PRINCETON	State NJ	Zip Code 08540	Transaction ID : SE24-0.031749
Purpose of Expenditure MEDIA	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: AZ District: 02
Name of Federal Candidate Supported or Opposed by Expenditure: RONALD BARBER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 156203.15		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	25050.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

[Electronically Filed]

Signature

Date

MM / DD / YYYY
10 / 08 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 2 OF 5
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date MM / DD / YYYY 10 / 08 / 2012
Mailing Address 815 SLATERS LANE		Amount 57076.58
City ALEXANDRIA	State VA	
Zip Code 22314	Transaction ID : SE24-0.031744	
Purpose of Expenditure MEDIA	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 02
Name of Federal Candidate Supported or Opposed by Expenditure: RONALD BARBER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 156203.15		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date MM / DD / YYYY 10 / 08 / 2012
Mailing Address 815 SLATERS LANE		Amount 57076.57
City ALEXANDRIA	State VA	
Zip Code 22314	Transaction ID : SE24-0.031745	
Purpose of Expenditure MEDIA	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 02
Name of Federal Candidate Supported or Opposed by Expenditure: MARTHA MCSALLY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 156203.15		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	114153.15
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

[Electronically Filed]

Date

MM / DD / YYYY
10 / 08 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 3 OF 5
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00075820 </div>	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee PUBLIC OPINION STRATEGIES		Date <div style="display: flex; justify-content: space-around;"><div style="border: 1px solid black; padding: 2px;">M M M</div><div style="border: 1px solid black; padding: 2px;">D D D</div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div style="display: flex; justify-content: space-around;"><div style="border: 1px solid black; padding: 2px;">10</div><div style="border: 1px solid black; padding: 2px;">08</div><div style="border: 1px solid black; padding: 2px;">2012</div></div>	
Mailing Address 214 N FAYETTE ST		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">8500.00</div>	
City ALEXANDRIA	State VA	Zip Code 22314	
Purpose of Expenditure SURVEY RESEARCH	Category/Type <div style="border: 1px solid black; padding: 2px;"></div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 02	
Name of Federal Candidate Supported or Opposed by Expenditure: RONALD BARBER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">156203.15</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee PUBLIC OPINION STRATEGIES		Date <div style="display: flex; justify-content: space-around;"><div style="border: 1px solid black; padding: 2px;">M M M</div><div style="border: 1px solid black; padding: 2px;">D D D</div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div style="display: flex; justify-content: space-around;"><div style="border: 1px solid black; padding: 2px;">10</div><div style="border: 1px solid black; padding: 2px;">08</div><div style="border: 1px solid black; padding: 2px;">2012</div></div>	
Mailing Address 214 N FAYETTE ST		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">8500.00</div>	
City ALEXANDRIA	State VA	Zip Code 22314	
Purpose of Expenditure SURVEY RESEARCH	Category/Type <div style="border: 1px solid black; padding: 2px;"></div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 02	
Name of Federal Candidate Supported or Opposed by Expenditure: MARTHA MCSALLY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">156203.15</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;">17000.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

[Electronically Filed]

Date

M M M

D D D

Y Y Y Y Y Y

10

08

2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 4 OF 5
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

FEC IDENTIFICATION NUMBER ▼

C

C00075820

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

M M M /

D D D /

Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

FABRIZIO MCLAUGHLIN AND ASSOCIATES INC

Date

M M M /

D D D /

Y Y Y Y Y Y

Mailing Address 915 KING ST

2ND FL

City

ALEXANDRIA

State

VA

Zip Code

22314

Amount

13200.00

Transaction ID : SE24-0.031750

Purpose of Expenditure
SURVEY RESEARCHCategory/
Type

Office Sought:

☒

House

State: IA

☐

Senate

District: 03

☐

President

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

LEONARD L BOSWELL

Calendar Year-To-Date Per Election
for Office Sought

444899.03

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

ONMESSAGE INC

Date

M M M /

D D D /

Y Y Y Y Y Y

Mailing Address 2130 PRIEST BRIDGE DR # 11

City

CROFTON

State

MD

Zip Code

21114

Amount

18800.00

Transaction ID : SE24-0.031751

Purpose of Expenditure
MEDIACategory/
Type

Office Sought:

☒

House

State: IA

☐

Senate

District: 03

☐

President

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

LEONARD L BOSWELL

Calendar Year-To-Date Per Election
for Office Sought

444899.03

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

32000.00

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 5 OF 5
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div><small>M M M</small> /</div> <div><small>D D D</small> /</div> <div><small>Y Y Y Y Y Y</small></div> </div>	

Full Name (Last, First, Middle Initial) of Payee CHRIS MOTTOLA CONSULTING, INC.			Date <div style="display: flex; justify-content: space-around;"><div><small>M M M</small> 10</div><div><small>D D D</small> 08</div><div><small>Y Y Y Y Y Y</small> 2012</div></div>	
Mailing Address 1382 LAFAYETTE ST			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">11892.67</div>	
City CAPE MAY	State NJ	Zip Code 08204	Transaction ID : SE24-0.031761	
Purpose of Expenditure MEDIA		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 21	
Name of Federal Candidate Supported or Opposed by Expenditure: WILLIAM OWENS			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">413277.14</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee MCLAUGHLIN AND ASSOCIATES INC			Date <div style="display: flex; justify-content: space-around;"><div><small>M M M</small> 10</div><div><small>D D D</small> 08</div><div><small>Y Y Y Y Y Y</small> 2012</div></div>	
Mailing Address 566 S RT 303			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">12500.00</div>	
City BLAUVELT	State NY	Zip Code 10913	Transaction ID : SE24-0.031760	
Purpose of Expenditure SURVEY RESEARCH		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 21	
Name of Federal Candidate Supported or Opposed by Expenditure: WILLIAM OWENS			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">413277.14</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	24392.67
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	212595.82

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

[Electronically Filed]

Date

M M M
10

D D D
08

Y Y Y Y Y Y
2012